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A PRACTICAL SEQUEL TO "MARRIED LOVE"

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ATHENÆUM.

WISE PARENTHOOD

A Practical Sequel
to "Married Love"

A Book for Married People

BY

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*Dedicated to all who wish to see our
race grow in strength and beauty*

Author's Note to the Fifth Edition.

THE origin of this book was an attempt to answer innumerable inquirers who, having read "Married Love," approached me desiring wholesome information on a subject of vital importance to themselves and to the race. Not only these individual inquirers, but the world at large, and even the medical profession, lacked a rational, scientific and critical consideration of the details concerning the methods for the control of conception, some of which are now so widely used. The book seemed urgently needed, because owing to this very lack of serious and scientific presentation, ill-informed and often debased instruction has been circulating freely.

The subject of the control of conception has not hitherto received that learned attention which its importance deserves; but for long there have been scattered in the medical and scientific journals and treatises and in other and more intimately human records, facts based on more or less isolated experience which, once correlated, are sufficient at any rate to form a basis for the kind of critical consideration which is wanted. The ethical, the romantic, the physiological, the frankly practical and economic aspects, and the distantly ramifying results of the various methods, are all of vital importance and are essentially interwoven. Though one or the other may have received some attention, those who have pronounced their opinions for or against the control of conception have hitherto generally done so

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without specifying to which means they refer, and often without taking into consideration the conflicting needs of different aspects of the life of even one individual. Without making an elaborate treatise of this book, all these points have been borne in mind while writing it.

As is indicated on the title page, this Fifth Edition has been revised, and certain changes which will I hope add to its usefulness, and a certain number of new passages, have been added. In my opinion it is still not only far from perfect, it is a mere embryo, a preliminary statement, although it does, I trust, give all the essential facts and conclusions now available which are of general public utility. I hope that, as the result of investigations and researches, it will be possible to introduce many improvements in succeeding editions.

Already I am indebted to very many men and women who have voluntarily confided to me their personal experiences and needs, thus supplying me with invaluable facts. My special thanks are also due to Professor E. H. Starling, C.M.G., F.R.S., who, while disclaiming any responsibility for this book, and even in various details definitely dissenting from my conclusions, has read the proofs of this edition and given me the benefit of his valuable opinions. The Rev. James Marchant, F.R.S. Edin., and Dr. Mary Scharlieb, C.B.E., M.D., M.S., have also very kindly read the proofs, and I have benefited by their suggestions, although we disagree on fundamental principles.

The new era which is now dawning should—

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must—be one in which the people are supplied with sound knowledge to meet their needs. Knowledge on many subjects which has been kept obscure in the past is beginning to reach the public in garbled form. Only if those of scientific spirit who possess the nearest approach to truth which is at the time available will assist each other in spreading the truth, can the public be really helped and enlightened.

Even in its present imperfect form, I sincerely trust that this little book will help to improve our race, and to check the spread of nervous and other injuries sadly prevalent as a result of ignorant attempts to obtain that wise and health-giving control of parenthood which all who think must crave.

I should like to take this opportunity of urging young couples who truly love, to have all the children to whom they can give health and beauty, even if by doing so they sacrifice their personal luxuries.

August, 1919.

M. C. S.

Author's Note to the Sixth Edition.

ON pages 36 and 37 a method of dealing with the most difficult cases of all is indicated in the hope that its great social significance may lead to its further study and improvement.

M. C. S.

July, 1920.



Chapter I.

"I think, dearest Uncle, you cannot *really* wish me to be the *Mamma d'une nombreuse famille*,' for I think you will see the great inconvenience a *large* family would be to us all, and particularly to the country, independent of the hardship and inconvenience to myself. Men never think, at least seldom think, what a hard task it is for us women to go through this *very often*."—QUEEN VICTORIA in a letter to the King of the Belgians, January 15, 1841.

A FAMILY of healthy happy children should be the joy of every pair of married lovers. To-day more than ever the course of duty and delight coincide for those who have health and love in their homes. For to-day as never before the world needs the products of sound and beautiful love, and though these range from the intangible aroma of peace and happiness which a rightly wedded pair radiate, through an infinite variety of spiritual and physical results, the most vital and the most potentially valuable to the community are the children.

Whatever theory of the transmission of characteristics scientists may ultimately adopt, there can be little doubt in the minds of rational people that heredity *does* tell, and that children who descend from a double line of healthy and intelligent parents are better equipped to face whatever difficulties in their environment may later arise than are children from unsound stock. As Sir James Barr said in the *British Medical Journal*, 1918: "There is no equality in nature among children nor among adults, and if there is to be a much-needed improvement in the race, we must breed from the physically, morally and intellectually fit."

Wise Parenthood

Nevertheless, the happiness which children should be in a home depends less on a conscious sense of civic virtue (though that may be a factor), than on an acute and warm personal feeling of the parents towards each other. Every man who finds beauty and goodness in his wife must feel a keen desire to repeat that beauty and goodness throughout all time, and every woman who has picked her mate freely, and because she thought him a knight among men, must long to see his characteristics reproduced, so that the world should not lose the imprint of his splendour when the inevitable happens and he has to pass. Indeed, one may almost take it as an axiom when dealing with true love that the pair do feel thus towards each other, and consequently desire children, unless they are aware that either is stricken by some inherent weakness or disease which might reappear in the child. Then they must refrain from parenthood out of a sense of duty and pity towards the unborn.

Nature herself provided that men and women should delight in meeting. Given a loving married pair in normal health, and unsophisticated in any way, there is seldom any lack of children around them after they have been wedded for some years. This is what is still described as the "natural" condition of affairs, and in these days of sophistication in so called "civilisation," some reformers urge a return to Nature and an unregulated birth rate.

If, however, the course of "nature" is allowed to run unguided, babies come in general too

quickly for the resources of most, and particularly of city-dwelling, families, and the parents as well as the children consequently suffer. Wise parents therefore guide nature, and control the conception of the desired children so as to space them in the way best adjusted to what health, wealth, and happiness they have to give. The object of this book is to tell prospective parents how best to do this, and to hand on to them in a concise form what help science can give on this vital subject.

This is not an attempt to present complete arguments to show the racial and national necessity for the Control of Conception: that has been done by others.

Recently valuable expositions of the supreme importance to humanity of a wise use of the control of conception have been made from many different points of view and by various distinguished people. Doubtless much more remains to be said, for there are many who are still ignorant, and consequently prejudiced against the greatest of the steps humanity can take next in its evolution; but this is not the place to deal with the wide aspect of the subject.

That a large proportion of intelligent and thoughtful married couples are practising at the present moment some method or other of the control of conception is beyond dispute. The question before us, therefore, is not whether or no knowledge of contraceptives should be allowed; it is already established. General dissatisfaction with most of the methods used is

however prevalent; and this dissatisfaction is not being alleviated, because there is also a widespread ignorance of satisfactory methods, even on the part of medical practitioners. Numbers of people who are practising and have been practising the control of conception by various means for years, are in urgent need of a better method than any known to them. The following pages are written for them.

If this book gets into the hands of some who have not given the subject of the control of conception adequate thought they should read the books mentioned on the fly-leaf at the end of this volume. This short list is only representative of a few of the more important aspects of the subject; but if a serious student is not yet convinced by them and will follow up and read all the other works referred to in them, he will then at any rate have a fair idea of the essentials of the subject and can form his own opinions.

What we are here concerned with is the fact that contraceptive methods of all sorts are now so widely used that it is high time serious attention should be devoted to the subject. People should not be employing anything less satisfactory than the best now obtainable; but, unless they are given the best, they will assuredly use some less desirable means.

I will give a quotation from one of our most ardent social reformers. The Rev. J. Marchant, Secretary of the Birth Rate Commission and Director of the National Council of Public

Morals, in his recent book, "Birth Rate and Empire," says as follows (pp. 144-146) :

If, then, the volitional control of births within the married state has become a normal proceeding, if it is fast losing its apparent indelicacy, if it is spoken about without raising vicious passions, if it is becoming the "correct thing" to do . . . we must give up the futile attempt to keep young people in the dark and the assumption that they are ignorant of notorious facts. We cannot, if we would, stop the spread of sexual knowledge; and, if we could do so, we should only make matters infinitely worse. This is the second decade of the twentieth century, not the early Victorian period. . . . It is, then, no longer a question of knowing or not knowing. We have to disabuse our middle-aged minds of that fond delusion. Our young people know more than we did when we began our married lives, and sometimes as much as we know ourselves, even now. So that we need not continue to shake our few remaining hairs in simulating feelings of surprise and horror. It might have been better for us if we had been more enlightened. And if our discussion of this problem is to be of any real use, we must at the outset reconcile ourselves to the facts that the birth-rate is voluntarily controlled, that brides and bridegrooms know how it is done, and many will certainly do it. Certain persons who instruct us in these matters may hold up their pious hands and whiten their frightened faces as they cry out in the public squares against "this vice," but they only make themselves ridiculous. Their influence in stemming the tide is nearly *nil*.

Mr. Marchant says "Brides and Bridegrooms know how it is done." That is true. They know some, perhaps several, ways of securing voluntary instead of involuntary parenthood, but very few have precise and satisfactory knowledge of, or understand the reasons against, many of the methods which are recommended to them either by medical men or by friends who, as ignorant as they themselves, have been in the habit of using methods described as "harmless," simply because they do no gross and obvious injury.

Many things are reckoned "harmless" which are nevertheless far from satisfactory. Let me

take an illustration from another aspect of our lives. Every medical man would consider doses of a half teaspoonful of ammoniated quinine as not only harmless but beneficial to a patient suffering from influenza. Nevertheless, some even in normal health find that a few such doses upset the digestion for several weeks. It is true that in an influenza epidemic it may be more important to order quinine than to think about people's digestions, and in this sense quinine is not only "harmless" but beneficial. There are many parallels to this in the use of various kinds of preventives which are described as "harmless."

It is amazing that medical and physiological science should have so neglected research on this most vital subject, and that a more perfect procedure should not yet have been devised: it is perhaps more amazing that the reactions and results of the methods now widely used should not have been thoroughly studied and understood. The method which I have to suggest is not yet the ideal, but it is much simpler, more healthful and less disillusioning than those most in vogue.

After giving the details necessary for the comprehension and employment of this one method which I can recommend, I shall mention one or two other of those in general use, with reasons why I think them inadvisable save in very special circumstances. The large number of other and still less satisfactory means employed will not be touched upon at all, as this is not a monographic dissertation, but an attempt to be

helpful by presenting, if not the ideal, at any rate the good in place of the less good or actually bad.

A few fortunate people who really understand their own physiology, or by happy instinct have chanced upon the right use of their bodies and have been in the habit of practising satisfactory methods, may say or think that such simple and direct instruction as follows is not needed. I have, however, overwhelming evidence and experience that ignorance is rife even in the very places where knowledge might be expected to hold sway. For some time past, scarcely a day has gone by without my receiving letter after letter from people who have long been married, from people who have consulted physicians, from people who have tried many experiments, and who are yet ignorant of any really *satisfactory* means of achieving what they have been perforce achieving in unsatisfactory ways. I once asked a medical woman who had had a practice for fifteen years what method she would advise: she knew of no method whatever. A well-known doctor in London, who for twenty years had had a general and important family practice, asked me if I could tell him of any method other than the sheath, which was the only one he knew, as his patients were inquiring and he did not know what to tell them. Many married couples, who are even told by the doctor that for the wife to have another child would be fatal, are at the same time not told any rational method of prevention. With variations depending on the temperament of the writer, I get appeals one after the other saying: "We have asked our

doctor, but he tells us nothing which is of any use. We have therefore to go on using this, that, or the other method, which we feel to be unsatisfactory, because we do not know what else to do."

Some churchmen recommend "absolute continence." Where the mated pair are young, normal, and in love, such advice is not only impracticable, it is detrimental. Under such conditions a rigid and enforced abstinence, even where it is not directly injurious to health, may yet have as harmful effects as incontinence. The capacities and requirements of people vary greatly, and no universal rule can apply to all. On the one side "absolute continence," and on the other an easy self-indulgence, are in married life equally to be condemned. In either of these two quagmires disasters lie in great variety. The narrow and safe path between them is a wise, reasoned and controlled use of the most intimate and sacred functions of the body.

Though for general guidance the suggestion which I have made, particularly in Chapter V of "Married Love," may be of service, yet each pair must find out for themselves the point where self-control becomes an object in itself and detrimental to health and vitality, and where on the other hand the expression of love begins to slide into a too facile indulgence.

My object is not to make sex-experience a danger-free indulgence, but to raise the sense of responsibility, the standard of self-control and knowledge which goes with maturity, and consequently the ultimate health and happiness of

those who mate. It should be understood by the man, who is in general the more active partner, that he has to consider not only himself but his mate, and that *the only right rule in marriage is that which gives the greatest sum total of health and happiness to the two concerned, for the benefit of the nation and the race.* To achieve this, most men will have to exercise a fine self-control, truly ennobling and strengthening both to mind and body.

A knowledge of the means of prevention of conception may co-exist with low standards of living and personal hygiene, but even then such knowledge may save the next generation the misery of being hurled into wretched conditions, and may save the community the cost of maintaining anti-social lives.

Some there are who would debar the personally selfish from the knowledge of such methods of control, but in taking that attitude they forget that it is just by those who do not trouble to *prevent* evils, that the worst and most disastrous attempts are made to overtake the evils they themselves originated. I do not wish in this book to speak of the prevalence and horror of the poor and ignorant woman's attempts at early abortions: the story would be too heartrending, and is out of place in this little book, which is one of help and guidance.

Destructive of the health of both mother and child are the frantic efforts of women "caught," prematurely after a birth, or too frequently in their lives, by undesired motherhood. The desolating

effects of abortion and attempted abortion can only be exterminated by a sound knowledge of the control of conception. In this my message coincides with that of all the Churches in condemning utterly the taking of even an embryonic life.

Chapter II.

"All turns on what we say is included under divine law. If it is *de jure divino*, then there is no power to modify it; but if any portion is not, then there is power."

DOES divine law condemn scientific methods of controlling conception?

The Memorandum of the Bishops of the Anglican Catholic Church, the doctrine of the Roman Catholic Church, the pronouncement in congress of the main body of Christian Nonconformists, and the Jewish Church, have all very similarly condemned what they call "artificial" methods. The Roman Catholic Church in particular is the most unyielding in its total condemnation of the use of scientific aid in controlling the production of children, although it—like the other Churches—concedes the principle of the justifiability of control in some circumstances. To concede the principle, even while condemning the best methods of effecting such control, is to deny the uses of intellectual progress. The stricter members of the Churches obey their edicts; or, with uneasy or unhappy consciences, disobey because they must, or because their training and intelligence teach them that they should make use of what scientific knowledge is available for their help.

The wisdom of the Churches is ancient and pre-scientific: humanity to-day is modern and lives under increasingly "artificial" conditions: only the divinely-given everlasting truths are eternal, and on these the Churches must base their authority. Are any such divine laws

given to the Churches about the Control of Conception?

I answer—None.

The Churches, old and wise, gave suitable advice on sex matters in the early days, and now, confusing their own ancient wisdom with the very word of God, they give to day similar advice, which is no longer wise.

In respect of the control of conception and general guidance concerning sex unions, the so-called Christian ethic (which incidentally goes back to Genesis for its origin, see page 411 of the First Report of the Birth Rate Commission) has for long neglected some of the highest potentialities of marriage. By chaining it to a low individualism, ignorant or forgetful that "they twain shall be one flesh," and that the married pair is not merely a couple of individuals, whose individual souls may achieve perdition or salvation, the greater truth has been hidden. I maintain that a married couple is a welded pair, a higher unit, whose existence and potentialities on this planet depend largely upon the physical condition of the material body of each of the pair, and of its interplay and exchanges, which are jeopardized without the knowledge how best to control the production of children.

The insistence sometimes made in the name of Christian "morality," that the act of physical union should take place only for the procreation of children, ignores profound physical and religious truths.

On physiological, moral, and religious grounds, therefore, I advocate the restrained sacramental and rhythmic performance of the marriage rite of physical union, throughout the whole married life, as an act of supreme value in itself, separate and distinct from its value as a basis for the procreation of children.

That being so, some knowledge of scientific methods of controlling conception becomes not only useful but of the highest—even of religious—significance.

Consider what is entailed in calling forth into existence new souls, each immortal, as all Churches maintain. This is surely one of the profoundest and most essential ways in which the Church can meet and guide humanity. Could any more exalted and more wonderful opportunity be given to the Churches than to see that the souls thus started upon their journeys, endowed with immortal power to serve or disserve God, should be brought forth in love and at such times as will give them every opportunity for complete human equipment?

The Churches, however, offer to serious and inquiring parents who can rear no more children only the alternatives of total and enforced abstinence, and the so-called "natural" method of consciously timing what should be a spontaneous natural impulse of love, to those periods supposed to be "safe." Both these methods I condemn for general use, although they may suit some individual needs. Both thwart what is a high and God-given impulse.

and in my opinion consequently both these practices are at times essentially immoral, almost as immoral as forcing sickly and unwanted children upon an unwilling mother and an overburdened world.

Marriage is a great and profound thing, and has a deep spiritual and physical significance apart from and in addition to being the basis of parenthood. And both these practices, allowed as the only means of birth control by the Churches, strike at the roots of the perfect marriage. The common folk who disobey and disregard this advice of the Churches, however wrong they are in their *methods*, are right in their deep instinct to obey God's ordinance that the twain shall be one flesh.

The divine law on this great subject has not yet been pronounced. The Churches have hitherto based their standard of social morality concerning it on human pronouncements. That being so, religious people should welcome the human understanding of those who to-day most seriously study the question in order to help forward the race in its material journey through space. Science, in reverent hands, may to-day on such a theme, more nearly reach divine law than the Churches have yet done.

That this is being felt, even among the leaders of the Church, may be gathered from such writings as those of the Dean of St. Paul's, and the published statement by the Bishop of Birmingham (*The Times*, April 8th, 1919) where he said: "Morally, as well as eugenically,

it was right for people in certain circumstances to use harmless means to control the birth-rate.
..... It was immoral to avoid having children from selfish motives, but it was surely also immoral to have child after child under circumstances which, humanly speaking, were such as to render the proper upbringing of such children impossible."

Chapter III.

BEFORE entering into the exact structural and medical details of the material method advisable for those who wish to control the birth of their children, I should like to say a few words on the general subject in its relation to the normal life of the married pair.

I sincerely hope that those who propose to read this little book will *first* read my "Married Love," because the whole complex experience of married life is so interwoven with the sex act, and consequent children, that it is almost impossible to state the one thing, namely, the controlling of conception, and discuss that by itself without distorting its relation to the whole of life and appearing to lay stress on the minor details rather than on the greater themes. My object in the following pages is, in the interests both of the pair and of society to spread what little light science has already thrown upon the subject, so that each pair may not only themselves be healthy and happy, but may bring forth children for the race, who have the best chance which that pair can give them of health and beauty and happiness. From a variety of causes our race is weakened by an appallingly high percentage of unfit weaklings and diseased individuals. It is perhaps only to be expected that the more conscientious, the more thrifty, and the more lovingly desirous to do the best for their children people are, the more do they restrict their families, in the interests both of the children they have and of the community which would

otherwise be burdened by their offspring did they not themselves adequately provide for them. Those who are less conscientious, less full of forethought, and less able to provide for the children they bear, and more willing to accept public aid directly and indirectly, are more reckless in the production of large families. Of course there are many individual exceptions, but they do not affect the general tendency. These facts are most significantly borne out by the statistics of the birth-rates of different types of people. For instance, in the Census Report for 1911 (as published and analysed in 1912), we find that the total birth-rate per thousand married men under 55 years old is 162; but that the birth-rate for the upper and educated classes on this basis is only 119, while that of comparatively unskilled workmen is 213 and over. The detailed analysis of trades and occupations is most interesting, and should be read in conjunction with a memory of the wages and social environment of the various homes. Reckoning per thousand married men below 55 years old, the average number of children is as follows:—

Anglican clergy	101	Postmen	159
Other ministers of religion	96	Carmen	207
Teachers, professors, etc.	95	Dock labourers	231
Doctors	103	Barmen	234
Authors, editors, etc. ...	104	Miners	258
Policemen	151	"General labourers" ...	438

The above figures apply only to children born of average married people; when the vicious and feeble-minded people reproduce, they do so more recklessly.

It is found, in short, that the *numbers* of our population increasingly tend to be made up from the less thrifty and the less conscientious. Were this only a superficial matter, it would concern the race but little, but it is penetratingly profound and far-reaching. The thriftless who breed so rapidly tend by that very fact to bring forth children who are weakened and handicapped by physical as well as mental warping and weakness, and at the same time to demand their support from the sound and thrifty. It is indeed most serious for any race when (as was pointed out recently in *The Times*, of the British to-day) less than half the population is "physically fit," even when fitness is judged by the comparatively low standard of present-day needs. Moreover we must remember that this half is not free and untrammelled, but is burdened by the partial support and upkeep of the unfit portion of the population, and hence is less able to support children of its own good type than it would be were the incapables non-existent. Hence only children with the chance of attaining strong, beautiful and intelligent maturity should be conceived. This can only be, when the whole relation of each married pair is rightly adjusted, and therefore it is my earnest request that those who have not yet read "Married Love" will lay this book aside until they have done so.

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Certain details concerning the structure of our bodies must be particularly considered in connec-

tion with the control of conception. It is possible to imagine very highly-specialised human beings who would only unite when they definitely desired a child. There are human beings to-day who advocate that course and who either practise it or endeavour to practise it, but as a race we have not evolved on lines to allow such procedure; and whether these people realise it or not, with few exceptions, they wrong their partner, they wrong themselves, and they wrong the community in which they live, by ignoring other facts and laying too heavy a burden on their own shoulders. One of the least serious, but most annoying, results to the community is a harshness of judgment, an irritableness and a tendency to quarrel and bicker, which such people frequently develop. A wise moderation should be exercised.

Our bodies bear the impress of many past material phases of our evolution; and because in the past myriads of young were needed by any race that should evolve, we still produce a far larger number of germs awaiting fertilisation than can ever be fructified and imbued with individual life. Yet each of those germs, unaware of its own futility if it reaches fertilisation at an unpropitious moment, is just as insistent in its development as the rarer favoured one which follows out the natural course of its career and gives rise to an individual. In each sex act myriads of sperm cells (each of which, had it had the female egg cell to fuse with, might have produced a living child) are daily destroyed, because in general the female has but one egg cell at a time ready for

fertilisation. Control of conception consists in shutting away all the millions of sperm from the one egg, instead of allowing one of those millions to develop while all the rest of the myriads perish.

When should such steps be taken?

(a) It is, in my opinion, advisable not to conceive a child in the very early days of marriage, because in the first few months at any rate the woman's system should be adjusting itself to new conditions, benefiting from the change in her life, and gaining poise and strength for the burden which she will have to bear. Nevertheless, some people feel that a child conceived in the first glow of rapturous union may be more precious than one born later. There is a certain cynicism about this last view, however, which I deplore, because a rightly mated and wisely temperate pair do not lose the rapture of their early love, but retain it with an added depth.

(b) After the birth of a child it is essential that there should be no hurried beginning of a second. *At least* a year should be given to the mother to regain her strength and to devote herself to the baby, before a second child is conceived, preferably more than one year, and some distinguished gynecologists even advocate as much as three or more years between births of successive children.

(c) In all cases of inherited disease, such as insanity and epilepsy, also where one or both of the partners are drunkards.

(d) In all cases where either of the pair is suffering from venereal disease. (It should be

recognised that all sex unions at such a time are to be most strongly deprecated.)

(e) In all cases where for a variety of reasons all the older children are puny and utterly unsatisfactory.

(f) In all cases where another child coming will rob those already born of the necessary food, or will force the mother to half-starve herself to bear or rear it.

(g) In all cases where the mother has already had six children, *unless* she has exceptional vitality and the ardent wish to bear more.

The community needs a variety of characteristics, and it is good that there should be men and women in social life who have been reared in large families, where they early gained characteristics of great service to those who fill a variety of offices. On the other hand, the children of small families, who have perhaps had more intimate affection showered upon them, also have their valuable characteristics. The human race has not yet sufficiently studied itself to have discovered more than a few mistaken ideas concerning the varying characteristics of children from small and from large families. The subject is one of very great interest, and requires intelligent handling by someone not blindly hypnotised by superficial statistics, but capable of analysing the essential factors in each life-history.

In the rough and haphazard way in which we are at present accustomed to speak about such subjects, all we can say is that where two married people have health and this world's goods sufficient

to endow half-a-dozen or more children with health, happiness, and a good start in life, their large family is one that should be of great service to the State. Nevertheless, this should not be put before the country unthinkingly as a universal ideal. The strain of bearing more than a few children is detrimental to a large number of the best women, and this finds its expression also in weakness, a tendency to ill-health, if not actually death, on the part of their infants.

Dr. Ploetz found that nearly 60 per cent. of babies born to women who had as many as twelve children always died. When the chances of death of an infant are 60 per cent. there must surely be some very special personal reason for a woman to bear such a problematical life. Country women of robust frame and with plenty of wholesome food and fresh air, may bear a dozen or more splendid children, but poor mothers in the crowded cities can seldom, without disaster, bring forth more than half that number.

Now it must not be imagined that by controlling births the pair are necessarily reducing the number of children they bring to maturity. As a matter of fact, by taking care to produce children only when they are fit to do so, parents immensely increase the chances of those children reaching maturity and living healthy and happy lives. It is important to notice that Holland, the country in Europe (until the war scare) the most advanced in relation to birth control, where almost everyone takes care that the children shall be well and voluntarily conceived, has greatly *increased*

its survival-rate. It has the lowest infant mortality in Europe, and it has saved itself the cost and wastage of innumerable babies' coffins, while actually accelerating its rate of increase of population. America, on the other hand, where the outrageous "Comstock" laws confuse wise scientific control with illegal abortion of lives already begun and labels them both as obscene, has, by thus preventing people from obtaining decent hygienic knowledge, fostered criminal and illicit operations. Women, driven to despair, to madness, by the incessant horror of pregnancies they dread, will by hook or by crook, from the street corner or the gutter, find out how to strangle the life which should never have begun.

In my book, "Married Love," in the chapter on "Children," I said, concerning the control of conception:—

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This may be done either by shutting the sperms away from the opening of the womb or by securing the death of *all* (instead of the death of all but *one*) of the two to six hundred million sperms which enter the womb. Even when a child is allowed to grow in its mother, all these hundreds of millions of sperms are inevitably and naturally destroyed every time the man has an emission, and to add one more to these millions sacrificed by Nature is surely no crime. To kill quickly the ejaculated sperms which would otherwise die and decompose naturally, is a simple matter. Their minute and uncovered bodies are plasmolised in weak acid, such as vinegar and water, or by a solution of quinine, or by many other substances.

To those who protest that we have no right to interfere with the course of Nature, one must point out that the whole of civilisation, everything which separates men from animals, is an interference with what such people commonly call Nature.

Nothing in the cosmos could be against Nature, for it all forms part of the great processes of the universe.

Actions differ, however, in their relative positions in the scale of things. Only those actions are worthy which lead the race always to a higher and fuller completion and the perfecting of its powers, which steer the race into the main current of that stream of life and vitality which courses through us and impels us forward.

It is a sacred duty of all who dare to hand on the awe-inspiring gift of life, to hand it on in a vessel as fit and perfect as they can fashion, so that the body may be the strongest and most beautiful instrument possible in the service of the soul they summon to play its part in the mystery of material being.

The exact method I recommend, which is a combination of the shutting away of the sperms from the womb and of securing their immediate death instead of letting them decompose naturally, is described in the next chapter.

Chapter IV.

Method Recommended.

TO be entirely satisfactory a method should combine at least three essentials—safety, entire harmlessness, and the minimum disturbance of spontaneity in the sex act (that is to say, it should be as little inæsthetic as is possible).

Marriage is too often the grave of romance, and undoubtedly the disabilities of recurrent pregnancies, and the consequent necessity which married people have so long felt of using some means of prevention, have done much to deaden the beauty and undermine the security of the marriage relation. Alas! that it should be so, but without question many of the less worthy people have known better how to retain the adventitious charms of union than have those united in holy wedlock.

Ideally all knowledge of methods of controlling conception should be confined to the married and those immediately about to marry. Something approaching a sacred initiation into the rites of marriage should be available, under dignified and impressive circumstances, for every wedded pair, but alas! this is a remote ideal, and to-day far too often the married are in ignorance of what should most vitally concern them.

This book is written essentially for the married. It is true that it may pass, directly or indirectly, into the hands of those who have not put any religious or civil seal on the bond of their love. But if it does, one can be sure that it will

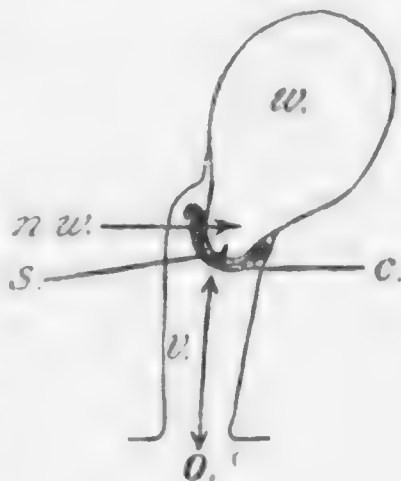
reduce, and not increase, the racial dangers which are so often coincident with illicit love. While on the other hand, if the knowledge in this book may enable a few wives *apparently* without reason to avoid all childbearing, it is surely well that such women should not be mothers, for motherhood is too sacred an office to be held unwillingly.

Some people, generally those who have been brought up in the hazy ignorance of either an idealistic or a shamefaced attitude towards sex, refuse to use any preventive method. Not infrequently a woman who has had several children and acquired a fear of pregnancy so refuses, and cuts off her husband from all normal intercourse, with, possibly, serious effects on the health of both. Such people should try to realise that because there may be a few inartistic moments in a course of procedure, that cannot rationally be held to prohibit the procedure. It would be as reasonable to decide that as some of the processes of cooking and the after-effects of digestion are inartistic, solid food should not be taken. In this physical world we are to a considerable extent dependent on the physical facts of our bodies, which we cannot override without making grievous trouble either for ourselves or those around us.

No method is *absolutely* safe, but if two methods, each very nearly reliable, are combined, then something approaching absolute safety is achieved. It must be remembered, however, that the most perfect procedure devisable cannot be safe in the hands of one who is careless. The one to whom the consequences of carelessness are most serious

is, of course, the woman ; she, therefore, is the one who should exercise the precaution. Consequently she must have knowledge sufficient to be sure that she is taking the right steps. A large number of women are not acquainted with the physical structure of the human body ; it is, therefore, necessary to describe a few essential features which all women must understand in order to take the best precautions.

A married woman has no difficulty in distinguishing the entrance of the vagina. The vagina itself is not a sex organ, but is the canal leading to the important internal organ—the womb. The ovaries, the actual source of the egg cells, are entirely internal and do not concern us here. The womb, however, though it is internal, can readily be felt near the end of the vaginal canal (*v* in diagram) if the woman feels for it with her longest finger (and the nail should be very clean, and is best covered with boracic vaseline before it is gently inserted). The distance from the opening of the vaginal orifice (*o*), which is the external opening, to the end of the vaginal canal where the womb can be just felt by most women, is generally about the length of the woman's own finger.



The womb (*w*) lies internally but at the end of the canal and a little to one side, its neck projects like an inverted dome of soft firm tissue (*uw*); in the centre of this is the very small actual opening (*s*) through which the sperm will pass if it is to fertilise an egg cell. This opening, however, is very small, and would not be felt under normal **circumstances by most women.**

The woman should know that it is there and that, therefore, if she wishes to prevent the sperm reaching the ovum this small entrance is the critical gateway through which the sperm must not pass. In the vagina itself, the sperms are merely waiting in the ante-room. The vagina, however, is of great importance to the man in the sex act, for it is into the vagina that his organ enters, and there it receives the sensations necessary for the completion of the normal act, the contact of the soft tissues of the parts being an important element in the right performance of the vital function. The ideal preventive method, therefore, does not interpose anything between the tissues of the vaginal canal and the male organ, but it should close the minute entrance of the womb and shut away the sperm **from entering that critical part.**

The best appliance at present available for doing this is a small rubber cap, made on a firm rubber ring, which is accurately fixed round the dome like end of the womb. It adheres by suction assisted by the spring of the firm rim against the circular muscles and remains securely in place, whatever **movement the woman may make.** (In the diagram, *c* shows the rubber cap in position.)

These small rubber caps are quite simple, strong, easily fitted, and should be procurable from any first-class chemist.¹ The important point about adjusting them is that they should be of the right size. The average woman is fitted by a small or a medium size, but the woman who has had several children generally wants them larger. Before insertion the rubber cap should be moistened with very soapy water, so as to allow it to slip in easily. Quinine ointment is sometimes preferred for this purpose, and if both the inside and outside of the cap be well covered with it, it may be unnecessary to insert a quinine pessary later (see page 31) if the cap is very well fitted. It should be fitted at any convenient time, preferably when dressing in the evening and some hours before going to bed. The great advantage of this cap is that once it is in and firmly and properly fitted it can be entirely forgotten, and neither the man nor the woman can detect its presence. It should be put in at least some hours before bedtime, and left in undisturbed until *at least* the following day; but I very much advise it being left in two or three days after any individual act of union. The reason for this will be mentioned below. After use, even if the cap is to be again inserted in an hour or two, it should be carefully washed in soapy water, and though not essential where there is perfect health, it is much better to dip it into a weak solution of

¹ This round rubber cap is also called the small check pessary or small occlusive pessary; sometimes, incorrectly, the *small mensinga*. A useful variety is made with a spiral spring. I am not here speaking of the larger mensinga or matrisalus pessaries. (See Appendix.)

some wholesome disinfectant before putting it away in the jar of water recommended in the Appendix. Some women put in the cap when the monthly period has entirely ceased, and leave it in for three weeks. I am not sure that to leave the cap in for so long is quite advisable, but it may remain undisturbed for a few days or a week quite safely under normal circumstances. If a woman suffers even trifling ill-health, accompanied by a slight local discharge, then there is no doubt that the cap should never be left in more than a couple of days at a time, though after being taken out for an hour or two and cleansed, it may be re-inserted on the same day. A woman who notices any need to remove her cap for cleansing very frequently would do well to have two and to keep them alternately in a disinfectant solution. Women very greatly vary in their vaginal effect on rubber. When it is unlikely that it will be required, it is always better *not* to keep the cap in place but to remove it.

Now the cap alone, if it really fits and if it is left in for some days so that the sperm are naturally got rid of without having a chance to enter, should be completely safe by itself. There is, however, always the possibility of a slight displacement or of a particularly active sperm remaining after the cap has been taken out and then using the opportunity to swim into the entrance of the womb. To render this impossible, or at any rate unlikely in the extreme, it is as well to plasmolise the sperms when they first come in; and in order to do this the best method is to have some plas-

molising substance in the vagina at the time when the sperms are deposited. The reason why it is better to do this rather than to wait and deal with the sperms afterwards is given in the paragraph on douching (see page 46).

Several substances may be used for the purpose of plasmolising the sperms. One which is the easiest, because it is specially prepared and can be purchased readily, is the soluble quinine pessary. As this is in a form which enables the woman to slip it in undetected the crisis is not æsthetically interfered with. In a few words, therefore, the readiest method of safe prevention is to combine the previously fitted rubber cap, which remains for some time in place, with the soluble quinine pessary slipped in a few minutes before the act. With these precautions, nothing further need be done. There is no getting up to douche or to take other precautions in the middle of the night, I do not even advise the removal of the cap or any steps being taken the following morning. The usual processes of Nature will dispose of the now impotent sperms. Those who are very anxious, however, who may feel this calm inactivity insufficient, may desire to douche the next morning and take out the cap. If they wish to do so, there is no harm in using one of the douches mentioned on page 49, so long as douching is not too frequently indulged in and does not become a regular habit.

About the action of quinine on the vagina I am still uncertain. For the average woman it is quite harmless; but, on the other hand, I am far from

persuaded that it may not be partly absorbed by the walls of the vaginal canal and thus penetrate the system in such a way as to make peculiarly sensitive women either somewhat sleepless or to interfere slightly with the digestion, or to initiate local tenderness. It has been proved by scientific experiment that some substances (iodine, for instance) do penetrate through the walls of the vagina and get into the circulatory system with remarkable rapidity. Whether or not the same applies to quinine has never been tested, so far as I am aware. It is likely, however, that it may do so. If, therefore, after using the quinine the woman finds herself in any way doubtful of its action, I should recommend her to try one of the following methods:—

(a) Instead of soluble quinine, to insert a small sponge (a fine-textured sponge about one and a half inches in diameter), which has been moistened and into which she has thoroughly rubbed soap powder, filling the pores of the sponge with powdered soap. It is important that only Castile or other pure soap should be used. This, if pushed up to the end of the vagina, should in itself be sufficient to render the sperm inactive. The sponge, however, should be taken out next morning; and, as this may displace the rubber cap, a douche may have to be used. It is therefore not quite so satisfactory a method as the soluble pessary which requires no further attention.

(b) A pad of cotton wool, thoroughly smeared with vaseline, which has been mixed with powdered borax, may be inserted into the end of the

vagina. This may be used by those who find soap in any way unpleasant, or irritating, as it would tend to be more soothing.

(c) A strip of boracic lint may be inserted and packed round the cap after its insertion and not very long before union takes place. This is perhaps the cleanest and easiest of these alternatives.

None of these methods, however, seem to me so easy nor quite so satisfactory as the soluble quinine pessary. The great drawback to the soluble quinine pessary, however, is that it is itself made of cocoa butter, and that the cocoa butter has an odour some people object to (this can be got over by purchasing the more expensive, scented kind), and that the melted cocoa butter tends to spread on to linen.

Several varieties of soluble pessaries are made with other substances on the Continent, but they are not so easily obtained in this country. In France the peasant women make up such things for themselves, and a woman who has time and skill could do this, using gelatine instead of cocoa butter. Gelatine however is not in itself an assistance, as is cocoa butter, and so gelatine suppositories are less reliable than ones composed of a greasy substance. The grease itself clogs the sperms and prevents their movements.

The greatest care should be exercised in getting a rubber cap exactly to fit. In order to put it in, the woman should be in a stooping position, sitting on her heels with her knees completely bent, and she should press the rim of the cap together so as

to slip it into the opening. When the cap reaches the end of the vaginal canal it will naturally expand and then tends to find its place itself (*c* in diagram). It wants pressing firmly round the protuberance of the womb, however, and if it is too small it may miss covering the critical opening. It should be the largest size which fits with comfort, and the rounded neck of the womb should be felt in the soft part of the cap. One too large, of course, will leave a gap and be more disastrous than one too small. A woman who is afraid of her own body or ignorant of her own physiology should get a practitioner to fit her with a rubber cap; but for women of average intelligence this is not necessary. (It is shown in place in the diagram at *c*.) On the other hand, as the relative sizes of all the parts of our bodies vary very much, a woman may have a vaginal canal longer than her own centre finger, and would then have to be fitted by a medical practitioner, a nurse, or some competent person. In the first instance, she should purchase more than one size to find out exactly what suits her. On each occasion it should be pressed firmly, after some active movement, to see that it does not slip. When the cap is once firmly on, both the man and the woman can be at ease about it, as it will remain in for days without dislodgment. But it should be tested by feeling round it before each time of union. It should perhaps be mentioned that it is quite impossible for the cap to enter further or get into the body cavity and "lose itself" among the organs, as some ignorant people fear.

In order to get it out, all that is necessary is to bend a finger under its rim and jerk it off. The cap can then be brought out, washed and left to dry until it is next wanted. The little jerk at the edge of the rim itself is necessary to overcome the suction effect which some women find unpleasant when they merely tug at the ribbon which is generally attached to the rim of the cap and lies along the vagina when the cap is in place. Rubber tends to rot; so, after some months' use, it should be carefully examined to see that it is not torn or become liable to be readily perforated. If the woman can afford it, I should recommend a new one every six months or so, though with great care they will last a couple of years.

Various forms of rubber caps are on the market, shaped in various ways, but the circular, strong ring, with the dome-shaped soft centre, is the kind I recommend and which to the average woman is by far the most satisfactory. (See Appendix.)

This procedure on the part of the woman, though it may sound elaborate and a little sordid when described in full detail, is, nevertheless, after the first usage, so simple and so unobtrusive, that it can be entirely forgotten during the marriage rite itself. It, therefore, alone among mechanical preventive methods, does not tend to destroy the sense of spontaneous and uninterrupted feeling, which is so vital an element in the perfected union, and at the same time allows all the benefit to be derived from it. Doubtless when once the intelligent inquiry and scientific research commensurate with the importance of the subject are devoted to it,

better preventive methods may be devised ; but, in the meantime this combination of methods is far the best course which I can recommend, and, indeed, the only one which I can sincerely recommend.

The most difficult cases of all, and at the same time those most urgently needing to exert reliable control over conception are the women who are dissolute, harried, overworked and worried into a dull and careless apathy, or who are so placed that they have neither time nor privacy to take the course recommended. These too often will not, or cannot, take the care and trouble to adjust ordinary methods of control so as to secure themselves from undesirable conceptions. For such there is great hope in the method of the "gold pin," or spring, sometimes called the "wishbone" pessary. This is, I understand, used by some experts in this country and is being widely and successfully adopted in America.

The method consists in the insertion into the open neck of the womb, the os, of a little spring which keeps the mouth of the womb very slightly extended and thus acts in such a way that it does not hinder the entry of the spermatic fluid, but that conception does not take place. The insertion should be absolutely painless and the presence of the spring thereafter should not be felt in any way.

The advantages of this method are that all consideration of the subject may be completed once and for all, and the spring should stay in place for years. No further anxiety or trouble on

the part of the woman is required, but a visit twice a year to a nurse or doctor to have the spring cleaned and examined. It is, therefore, the one and only method (apart from actual sterilisation) which is applicable, and of real help to the lowest and most negligent strata of society. It is therefore a method of the greatest possible racial and social value, and should become widely known and practised.

For the more careful woman, too, it has the advantage of being the most *æsthetic* of all methods because, once inserted, it requires no further thought; and also it allows the seminal fluid full access to and contact with the woman's tissues while making conception impossible.

It has, for the healthy and still child-bearing woman, however, one drawback so serious that its use ought not to be risked by her at present: it is believed to jeopardise the bearing of future children if it is long in use, by accustoming the womb to remain just a little open and so preventing conception even after the spring is removed. Sufficient observation has not yet been made on this point, so I should only advise its use by women who already have all the children they ought to have. Its chief value should be for the C 3 mothers who are already sufferers from the over-production of children and have been rendered dull and careless through misery.

All health workers, district nurses, and workers in schools for mothers know scores of such women, and many have appealed to me asking what they are to advise for women too careless to use any

ordinary method. Welfare workers should see that such C 3 women have these springs inserted by qualified doctors or nurses.

There are great varieties of individual needs on the part of various people, and as a good many methods are in common use a few words about them are necessary, as I find that many people are using them without realising that they may thereby, to a greater or less degree, injure themselves.

Chapter V.

Comments on a Few of the Important Methods in Use.

THE shutting away of the sperm from the womb can be as completely achieved by covering the male organ as it can by covering the mouth of the womb by the rubber cap, as has just been described. This method is perhaps the best known of all in current use, and *sheaths* under various names, formed either from rubber, skin, or treated silk, are sold in a variety of qualities and designs. They are alike, however, in the essential, namely, that they enclose the male organ, completely preventing the sperm from escaping into the vagina.

These are certainly among the most "harmless" of the methods recommended by many people, and, where a pair has used them with satisfaction, there is no essential need to discard them. In my opinion, however, there are objections to them which are sufficiently serious to make the use of a sheath, except under special conditions, inadvisable.

A serious objection is that the sheath prevents the seminal fluid reaching the woman, and, though very little is definitely known on this subject, it has been maintained that there is a physiological advantage to the woman in the partial absorption of the man's secretions, which must take place through the permeable wall of the vaginal canal, quite apart from the separate and distinct act of fertilisation. If, as physiology has

proved is the case, the internal absorption of secretions from the sex organs plays so large a part in determining the health and character of remote parts of the body, it is extremely likely that the highly-stimulating secretion of man's seminal fluid can and does penetrate and affect the woman's whole organism. Actual experiment has shown that iodine placed in the vagina in solution is so quickly absorbed that in an hour it has penetrated the system and is even being excreted. It is difficult, however, to argue from the behaviour of so diffusible a substance as iodine, and it still remains for scientific experiments to be devised which will enable us to study the question of the absorption of substances from the seminal fluid.

A further objection to the use of the sheath is that it reduces the closeness of contact and thus destroys the sense of complete union which is not only pleasurable, but is definitely soothing to the nerves and physiologically and spiritually advantageous in every way.

A minor, but nevertheless important, objection is an æsthetic one—the putting on of a sheath, the feel of its texture, and the consciousness that it is there, destroy the spontaneous beauty of what should be the natural development of mutual feeling.

If, however, *it is absolutely essential* that no risk should be run of the wife becoming pregnant (if, for instance, it would kill her to have another child), then perhaps the sheath may be used in addition to the method taken by the wife, because no one method gives *absolute* security by itself,

though it may give 9,999 chances of security to one of danger. But for normal healthy people I do not recommend the sheath.

Advice is often given about washing and disinfecting the sheath so that it can be used again. But this is not really a wise procedure, for few private people are likely to be sufficiently careful to make such disinfection complete. Preferably the sheath should be destroyed and a fresh one used each time.

The method perhaps most widely in use of all, and which appeals to many people because it requires no special appliance or chemicals, is *withdrawal*, or *coitus interruptus*. Many who are inclined, without sufficient knowledge, to condemn other methods, consider that this must be entirely harmless, because nothing is involved which they consider "unnatural." Nevertheless, this method has without doubt done an incredible amount of harm, not directly, but through its reactions on the nervous systems of both man and woman. Many doctors, now that the subject has been opened, have communicated with me confirming this statement from their experience. To a medical correspondent I am indebted for the interesting observation that "coitus interruptus" is not a certain method of controlling conception: owing to the presence of active sperm cells in the beads of clear secretion which are often present on the male organ during erection and *before* ejaculation has taken place. This doctor has seen under the microscope in his own case active

sperm in such drops. This fact may be the reason behind those fairly frequent cases where undesired conception has taken place and both parties unite in declaring that none of the ejaculation touched the woman. There are a few arguments in favour of withdrawal which make some people regret its condemnation, the chief of these arguments being that it requires no outlay of money and that it is available at any time and place. Individuals who have particularly strong muscular and nervous systems may go through life using this method and feel from it no ill effects. Their advocacy, however, should not blind the greater number of people to its dangers. Some men are strong enough to feel no evil effects even from its constant practice; but others who do not trace it directly to this are, nevertheless, sufferers through their nerves, and consequently through their digestions and power of sleep (ills which a competent observer can trace to this procedure); and some men are acutely conscious of its ill-effects.

The great majority of women whose husbands practise this method suffer very fundamentally as a result of the reiterated stirring-up of local nervous excitement which is deprived of its natural physiological resolution. Of the far-reaching effects on the woman's entire organism of the lack of a proper orgasm, which is generally a result of this method, this is not the place to speak, and the reader is referred to "Married Love" where various aspects of the subject are more fully considered. Some women whose

husbands are among those capable of using this method without apparent ill effect, maintain that the husband can, and always should, control his reaction sufficiently long to give the wife her complete orgasm before his withdrawal. Such power on the part of the average man, however, does not seem very common. Where it exists, it does undoubtedly remove the objection to withdrawal indicated in the preceding passage, but even in the best of circumstances the following specific objections exist. The local support and nerve-soothing contact which are supplied mutually to both when the act is completed normally are destroyed. The man, instead of allowing himself the normal ease and relaxation of attention which should be the concomitant of the act, has to keep a strain upon his attention in order to withdraw at exactly the right second ; he is thus straining not only his local nervous system, but his central nervous system.

The woman, even when she has the good fortune to have a husband with exceptional powers of control, is always in a state of anxiety in case the withdrawal should not be rightly timed, or that some of the fluid should accidentally touch her. In either case pregnancy is possible ; so that *her* central system, as well as her local nervous system, is also strained. The act, therefore, cannot have the soothing and healing power which it normally should have, and is, moreover, resolved into its lowest terms—merely physical “relief” for the man.

In addition to this, if there is the slightest delay

in withdrawal or any carelessness, the woman has immediately to arise from the warm bed and douche, in the anxious hope that she may be in time. (Concerning douching see what I have to say below, p. 46.)

Except for cases of emergency or in circumstances involving accidental failure of other means, or by exceptional people who have become specially adapted to this malpractice, withdrawal should never be used. Most unfortunately, by a certain "virtuous" type of person this method is described as "self-restraint" and so has been surrounded with an aura of approval, and thus the incalculable harm it does is increased.

Another practice which is sometimes advocated as a method of control of conception is in some ways a further extension of the power to withdraw at will. It is, in truth, a real form of self-restraint, though it is not the restraint of abstinence from all connection. This method consists in a strong mental control exerted by the man after his entry, a control which differs from that in the practice of withdrawal in that it aims at avoiding any ejaculation whatsoever, while at the same time retaining erection and remaining as long as possible in the closest union with the beloved. This controlled restraint appears to be possible to a certain type of man, and it has been studied and has formed the subject both of experiment and published statements for nearly a century. The mental attitude of those who adopt it can be essentially summed up in a few words: Union for the mutual spiritual and physical sense of joy

and comradeship, kept distinct from the procreative act by the strongest possible guidance and control by the will, so that the procreative act or ejaculation does not take place at all. Those who practise this method speak with enthusiasm in its favour. I find, however, most medical men in this country, who are cognisant of it, are very strongly against it, and from general deductions I think it is safe to assume that it is not particularly suited to the average Englishman's temperament and powers, and indeed might very well be detrimental to his health. Although this book is essentially addressed to the average, the advanced and the more spiritually minded should not be ignored, and there is no doubt that this method would *appear* to avoid many of the drawbacks and objections to mechanical methods of preventing conception. Though I must disclaim any expression of opinion in its favour, if it proves valuable and health-giving to some and highly detrimental to others, data collected on this point may throw light on still further fundamental divergencies in human needs and construction, and be of great social interest and value.

Various instruments, some of metal, have been made and from time to time recommended for the internal use of women. They should in any circumstance only be used after the fullest and most competent medical examination and must be fitted by a doctor. For some unfortunate women who have been damaged by child-birth, and whose organs are no longer normally placed, they may be necessary. For normal women they are generally to be condemned.

The method most widely practised by women, and which is recommended as not only "harmless" but by many as positively beneficial, is *douching*. About this method there is very much to say.

In the first place, in the nature of things the douching must come *after* the act of union. As sometimes the sperm may be ejected actually into the womb itself, douching after the event may be quite futile. But even where this has not happened, and the sperms are still in the vaginal canal, it resolves itself into a race between the plasmolising fluid and the sperms; and the sperms, having already got something of a start, may win the race, and penetrate the womb. In that event douching may be entirely too late. There is, therefore, no certainty whatever in the method of douching, though as a result of the shock and general discomfort entailed it may very often inhibit conception.

The objections to it, even if it were, what it is not, a safe method, are twofold: æsthetic and physiological. The æsthetic objection is by no means to be despised, for the effect both on man and wife of having immediately to rise from a warm embrace and come down to the crudest material facts of douches and chemicals at the moment when the whole relation should be one of tenderest mutual feeling and repose, is desolatingly disillusioning to a romantic man or woman. In not a few instances it has broken up sex relations entirely by destroying the man's sense of romance, so that he is no longer capable of physically loving his wife, while there are wives who refuse all sex relations to their

husbands on the ground that the douching involved is intolerable.

The man, however, is often saved the disadvantages by the natural sleep which follows his completed act. It is the woman who chiefly suffers by this method. Physical reactions on the woman are of two principal kinds: the first, subtler, and generally overlooked, is that her inclination to sleep (if she has been fortunate enough to have had the completed act) is thwarted if not entirely destroyed. The tendency of this is to make her nervous, and, if she is highly strung, to induce chronic sleeplessness. On the other hand, she also suffers from the local chill of getting up out of a warm bed and moving about the room, unless she is one of the very few fortunate ones who can afford a fire in a bedroom and a maid to prepare the warm douche. Most women have to do these things themselves, and even douching with warm water does not eliminate the general chill.

There is, however, another and more serious objection against the douching which is so widely advocated. It washes out and destroys the bacterial inhabitants of the vaginal canal. People insufficiently acquainted with science have jumped to the conclusion that this is a good thing, because some bacteria are known to them to be enemies of mankind. They think it therefore an act of cleanliness to wash out the vaginal canal, and they even go so far as to compare it with brushing the teeth and rinsing the mouth.

Some people, observing the "dirty" little nodules on the root of the pea plant, and being told that they

contain bacteria, would be impelled to pinch them off—thereby depriving the plant of its most valuable allies—the bacteria which “fix” the nitrogen from the air and which consequently place the pea plant in a more advantageous position than most of the members of the vegetable kingdom. It is true that doctors have not yet thoroughly examined or discovered exactly what part the bacteria in the vagina play in the internal economy of the woman, but sufficient evidence has accumulated to show the folly of destroying them and at the same time affecting the lining of the vaginal canal. For some years I have been against douching, save in emergencies. Recently a definite denunciation of douching was published in the *British Medical Journal*, of April 20, 1918, by Dr. Fothergill. This article is, of course, by no means final, any more than are my own private views on the matter, but it deserves the careful attention of the many people who indulge in or recommend the frequent use of the douche of all kinds.

Nevertheless, there are occasions when douching may be necessary, and when it is only used infrequently it can do no harm if the proper solutions are employed.

Regarding the solutions which should be employed when a douche seems advisable, a large number of substances, all of which are soluble or mixable with water, have been recommended by various people. It is to be remembered that at present I am recommending only those suitable for normal healthy people. Specific diseases, of course, require specific treatment.

Many of the so-called "harmless" substances used for the douche are very far from being entirely harmless. Such a chemical as corrosive sublimate, for instance, which is often recommended, ought not to be placed in the hands of the private individual haphazard, and, moreover, though but few serious cases are on record against it, when one realises that the vaginal walls may absorb part at least of the fluid, its use is to be entirely deprecated save for specific diseases.

Lysol, carbolic acid and other such strong fluids, though "harmless" if diluted sufficiently, are, nevertheless, destructive rather than healing in their action, and if by accident are used too strong, or even if used frequently by a sensitive subject, are very apt to lead to sores or even partial destruction of the tissues.

Only the simplest and most wholesome substances, therefore, are to be recommended for general use. For the purpose of douching to plasmolise the sperms, either vinegar and water or common salt and water could scarcely be bettered. If vinegar and water are used, it should be in about two parts of warm water to one of vinegar. A stronger solution would do no harm if used infrequently, but would tend to harden the vaginal walls if used regularly. Common salt should be made into a strong solution, and about two tablespoonfuls of salt to a pint of water. These solutions are quite sufficient to incapacitate any sperm, and at the same time they contain no substance in the

slightest degree deleterious or even very foreign to the system if partly absorbed.

People have for too long coupled normal prevention for quite healthy people with disinfection of one or other of the pair where disease exists or is suspected. In this book I am not dealing with cases of the diseased or the medically unfit in any way. They may, under doctor's orders, have to use strong, even perhaps dangerous chemicals. I am now only advising the perfectly normal and healthy what to use to keep themselves normal and healthy, for I think it is time to disentangle simple control of conception by healthy people from the covert attempts to stay the progress of racial diseases.

It will be seen from the above, therefore, that on the whole I strongly deprecate douching as a regular practice, but should advise every woman to have a douche available for infrequent use on occasions, when she should employ simple salt and water, or vinegar and water, in making up the douche.

Many people are under the impression that if the act of union is confined to certain days, they are then quite safe, and that conception will not occur. The dates vary slightly, depending on the exit of the unfertilised egg cell; but, on an average, from the fourth or fifth day after menstruation for about a fortnight a woman is said to be unable to conceive. This may be true for some individuals, whose reproductive vitality is not very acute, but it is extremely unreliable, and in many instances is quite deceptive. The reason

for this is obvious to those who know the structure of the parts. Male sperm can live, if it is vital and healthy to begin with, for eight or ten days: during any time throughout this period one deposited days before may emerge from some crevice in the skin of the vaginal canal in which it has lain concealed and swim into the womb and ultimately effect conception, though it is true that the chance of this taking place is not so great as the chance of conception following an active orgasm. Nevertheless, cases are on record when a sperm has made its adventurous journey not merely from the vagina into the womb, but from the outside organs of a virgin girl.

Some people, therefore, to whom it is not a financial disaster when a child is born, may find the comparative security of a "safe period" sufficient. But I am inclined to advise against its observance, because the "safe period" is obviously the time when the woman has less physiological benefit from the sex act, and also because I think that so important and fundamental a need as the act of married union should not be thwarted by waiting for dates on the calendar, when it could be so much better fulfilled at the normal time of desire if the woman is protected in the way which I have recommended on page 28.

Another "method," often advised by well-meaning people and sometimes by nurses and even by doctors, is for the woman to feel safe while she is nursing her child. Prominence has been given to this advice by the fact that there is

a very proper movement on foot at present to encourage so far as is possible the nursing of infants by their own mothers. One fears sometimes that well meaning but insufficiently instructed people unconsciously urge as an advantage which may accrue from such nursing that security from too rapid pregnancy which is so pathetically desired by the poorer working women. It is true that very generally a nursing mother does not become pregnant, but too many instances are known to me when even in the early months of nursing, pregnancy has begun, for me to feel that the advice should ever be given without qualification. The security offered is as unreliable as that of the "safe" period.

Another danger of such advice is that the poorer and more ignorant women are tempted to continue to nurse an infant long after the milk has lost its nourishing quality, in the hope of delaying so long as is possible the time when they are liable once more to become burdened with yet another unprovided-for child. So long as the flow of milk remains, it is far too easy for the assumption to be made that the child is having all that it requires, whereas this may be very far from the truth, and the infant may be on the highway to rickets and many other forms of general weakness, while the system of the mother is also drained and she is weakened and exhausted needlessly. Every encouragement and inducement should be given to women to nurse their own babies, when they have suitably nutritious milk. Yet one cannot too strongly deprecate the confusion of thought

which coincidentally urges the nursing period as the "safe" period, although alas, this is often done by estimable people.

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Of the many other varieties of methods and substances recommended and in use, I do not propose to speak. Those who have read the present pages with attention will be able to appreciate for themselves arguments against their use. Nevertheless, the *ideal* method is not yet discovered, though I am following up a line of research at present, on a method designed greatly to improve on those now available. Meanwhile, if anyone knows of any method better than that now suggested, I sincerely hope that he or she will publish it or will communicate it to me, in care of my publisher.

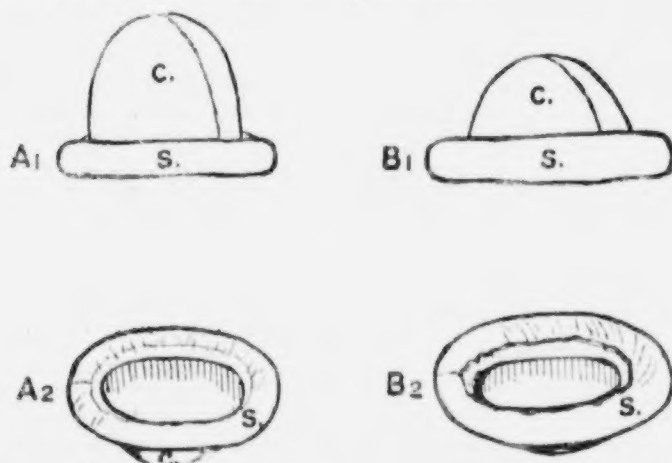
NOTE.—Both my publisher and I must be excused from answering any letters about the names of the appliances or substances mentioned in the text. As described, they can be obtained from many high-class chemists. Anyone living in a very small village should write to one of the larger chemists or drug stores in town, or apply to their local doctor. As a number of inferior makes are on the market it is important to obtain the best only: failures due to inferior articles should not be attributed to the method itself. (See Appendix.)

APPENDIX.

The rubber caps recommended on p. 28 have long had the approval of the chief authorities in various countries. They are made by different firms, but unfortunately sometimes in an unsatisfactory form. Since the first edition of this book was published, I have followed up various complaints of failure, or of inability to obtain exactly the article demanded, and have been surprised and disappointed at the variability of the article which is sold as the small check pessary. The relative size and proportion of the cap to its rim have a significance which it may be worth stating. In the accompanying diagrams, A_1 and A_2 are drawings of a satisfactory cap; B_1 and B_2 drawings of a type frequently sold, and in my opinion not only unsatisfactory on general principles, but liable to lead to those failures which have made some people distrust this most valuable method. The points to be noted in the drawings are primarily as follows:—The spring ring S and the conical portion C should be in such relative proportions towards each other as is indicated in A, and not as in B, where the rim is too thick and heavy and the conical portion C is too flat and small. There is an interesting physiological reason against so flat a cap, which it would perhaps be out of place here to elaborate. A further point to be noted is that the whole appliance, both rim and cap, should be of very pliable and soft rubber and should not be withered or wrinkled in the slightest degree. Also the line of junction, indicated down the fine line in the drawings of C, should be entirely secure, and without the smallest thin area or perforation. I have had sent to me a cap, otherwise perfect, in which a minute bubble in the rubber just at this junction had developed into a hole more than large enough for the

entry of the sperm. To ascertain that the line of junction is secure, the cap should be held up to the light and examined, preferably by a magnifying glass.

In figures A₂ and B₂ the caps are reversed and shown from underneath, and the line of junction between the soft cap C and the surrounding ring S is apparent. In A it will be noted that the junction is smooth and that the cap and ring merge into one another. But in B there is a comparatively rough welding of the thick raw edge of the cap C, which is—or may be—a very dangerous source of failure. No cap which is offered with such a rough interior should be accepted by a would-be purchaser.



It should be remembered that rubber tends to perish, even when not in use, and that to put away a cap dry for months or more, and then bring it into use may mean serious failure, owing to the development of small cracks. Rubber which is not in use is best kept under water, as it is in scientific laboratories. A small china or celluloid pot or jar with a lid should be available, filled with water, under which the cap is submerged after it has been washed out and dipped into a simple non-corrosive disinfectant solution. Time under water may discolour the cap somewhat, but should tend to preserve its essential pliability and usefulness.

Books Recommended for Reading.

- REPORT OF THE NATIONAL BIRTH-RATE COMMISSION. Pp. xiv, 450. Publ. Chapman and Hall, London, 1917.
- PROBLEMS OF POPULATION AND PARENTHOOD. Second Report of the National Birth-Rate Commission. Pp. clxvi, 423. Publ. Chapman and Hall, London, 1920.
- DRYSDALE, C. V., D.Sc.—"The Small Family System." Publ. Fifield, London, 1913.
- FOTHERGILL, W. E., M.A., B.Sc., M.D.—"A Clinical Lecture on the Bad Habit of Douching." *British Medical Journal*, pp. 445-446, April 20, 1918.
- KNIBBS, G. H.—Appendix A, Vol. 1, to the Census of the Commonwealth of Australia (Applied to the data of Australian Census, 1911). Pp. xvi, 466. Publ. Melbourne, 1917 or 1918. (No date on title-page.)
- MARCHANT, REV. JAMES.—"Birth Rate and Empire." Pp. xi, 226. Publ. Williams and Norgate, London, 1917.
- MARCHANT, REV. JAMES, C.B.E., LL.D., edited by—"The Control of Parenthood." By Prof. J. ARTHUR THOMSON, M.A., LL.D.; Prof. LEONARD HILL, M.B., F.R.S.; The Very Rev. DEAN INGE, C.V.O., D.D.; Mr. HAROLD COX (*Editor "Edinburgh Review"*); Dr. MARV SCHARLIEB, C.B.E., M.D., M.S.; Sir RIDER HAGGARD, K.B.E.; Rev. Principal A. E. GARVIE, M.A., D.D.; Rev. F. B. MEYER, B.A., D.D.; Dr. MARIE STOPES, D.Sc. Ph.D., F.L.S. Introduction by THE BISHOP OF BIRMINGHAM. Publ. G. P. Putnam's Sons, Ltd., London, 1920.
- MORE, ADELYNE.—With an Introduction by Arnold Bennett.—"Fecundity *versus* Civilization: A Contribution to the Study of Over-population as the Causes of War and the Chief Obstacle to the Emancipation of Women, with special reference to Germany." Pp. 1-52. Publ. Allen and Unwin, London, 1916.
- MILLARD, C. KILLICK, M.D., D.Sc., Medical Officer of Health for Leicester.—"Population and Birth Control. Presidential Address delivered before the Leicester Literary and Philosophical Society." Pp. 1-48. Publ. Thornley, Leicester, 1917.
- STOPES, MARIE C., D.Sc., Ph.D.—"Married Love." Pp. xvii, 116. Publ. A. C. Fifield, London, 1918. Seventh edition, revised and enlarged. Pp. 1-189. Publ. G. P. Putnam's Sons, Ltd., London, 1919.
- STOPES, MARIE C., D.Sc., Ph.D.—"Radiant Motherhood," Pp. ix, 236. Publ. G. P. Putnam's Sons, Ltd., London, 1920.

